

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 5  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arrowhead Graphics, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 19 / 2014</b>		
Mailing Address <b>508 Houston St</b>			Amount <b>7698.23</b>		
City <b>Greensboro</b>	State <b>NC</b>	Zip Code <b>27401</b>	Transaction ID : <b>SE.7964</b>		
Purpose of Expenditure <b>IE-Bevin-Door Hangers</b>		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 19 / 2014</b>		
Name of Federal Candidate <b>MATTHEW GRISWOLD BEVIN</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>41299.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Best Western-Louisville</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 17 / 2014</b>		
Mailing Address <b>9802 Bunsen Way</b>			Amount <b>51.28</b>		
City <b>Louisville</b>	State <b>KY</b>	Zip Code <b>40299</b>	Transaction ID : <b>SE.7961</b>		
Purpose of Expenditure <b>IE-McConnell-Travel</b>		Category/Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 17 / 2014</b>		
Name of Federal Candidate <b>MITCH MCCONNELL</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>33529.74</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>7749.51</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*
*[Electronically Filed]*

Date

 MM / DD / YYYY  
**02 / 20 / 2014**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 5  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Best Western-Louisville</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 18 / 2014</b>	
Mailing Address <b>9802 Bunsen Way</b>		Amount <b>63.48</b>	
City <b>Louisville</b>	State <b>KY</b>	Zip Code <b>40299</b>	Transaction ID : <b>SE.7962</b>
Purpose of Expenditure <b>IE-McConnell-Travel</b>	Category/Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 18 / 2014</b>	
Name of Federal Candidate <b>MITCH MCCONNELL</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <b>33593.22</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 16 / 2014</b>	
Mailing Address <b>400 N Capitol St., NW</b> <b>Suite 735</b>		Amount <b>439.41</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>	Transaction ID : <b>SE.7959</b>
Purpose of Expenditure <b>IE-McConnell-Travel</b>	Category/Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 16 / 2014</b>	
Name of Federal Candidate <b>MITCH MCCONNELL</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <b>33436.76</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>502.89</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

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**02 / 20 / 2014**

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 17 / 2014</b>		
Mailing Address <b>400 N Capitol St., NW Suite 735</b>			Amount <b>41.70</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>	Transaction ID : <b>SE.7960</b>		
Purpose of Expenditure <b>IE-McConnell-Travel</b>		Category/ Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 17 / 2014</b>		
Name of Federal Candidate <b>MITCH MCCONNELL</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought <b>33478.46</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 18 / 2014</b>		
Mailing Address <b>400 N Capitol St., NW Suite 735</b>			Amount <b>7.93</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>	Transaction ID : <b>SE.7963</b>		
Purpose of Expenditure <b>IE-McConnell-Travel</b>		Category/ Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 18 / 2014</b>		
Name of Federal Candidate <b>MITCH MCCONNELL</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>		
Calendar Year-To-Date Per Election for Office Sought <b>33601.15</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>49.63</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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*R. Russ Walker*
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 FOR SE OF FORM 24/48

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY   /  /  </div> <div>MM / DD / YYYY   /  /  </div> <div>MM / DD / YYYY   /  /  </div> </div>	

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 8.45		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.7965		
Purpose of Expenditure IE-McConnell-Travel		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2014		
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Freedomworks, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 144.15		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.7968		
Purpose of Expenditure IE-McConnell-Travel		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2014		
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	152.60
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Chris Gallaher</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 20 / 2014</b>	
Mailing Address <b>118 Butteleft Ct.</b>		Amount <b>5000.00</b>	
City <b>Goodlettsville</b>	State <b>TN</b>	Zip Code <b>87072</b>	Transaction ID : <b>SE.7966</b>
Purpose of Expenditure <b>IE-Bevin-Field Coordinator</b>	Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 20 / 2014</b>	
Name of Federal Candidate <b>MATTHEW GRISWOLD BEVIN</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>46451.98</b>		Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>5000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>13454.63</b>

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*R. Russ Walker*
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